

# CODEx ALIMENTARIUS COMMISSION



Food and Agriculture  
Organization of  
the United Nations



World Health  
Organization

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Agenda Item 3, 4, 6(a), 6(b), 6(d), 8(a), 8(b), 8(c)

RVDF/22 CRD/09

**JOINT FAO/WHO FOOD STANDARDS PROGRAMME**  
**CODEx COMMITTEE ON RESIDUES OF VETERINARY DRUGS IN FOODS**  
**Twenty-second Session**  
**San José, Costa Rica, 27 April – 1 May 2015**  
**COMMENTS OF AFRICAN UNION**

**Agenda Item 1 Provisional Agenda**

Agenda Item 5 was not available as at the time of commenting.

**Agenda Item 2 Matters Referred by the Codex Alimentarius Commission and other Codex Committees**

COMMENTS/OBSERVATIONS	RECOMMENDATIONS OF AU
<p>AU took note that the CAC37 :</p> <ol style="list-style-type: none"> <li>1. Adopted the revision of <i>the Risk Analysis Principles Applied by the CCRVDF</i> to include Extrapolation of Maximum Residue Limits (MRLs) of Veterinary Drugs to Additional Species and Use of the Concern Form for the CCRVDF, as proposed by CCRVDF21;</li> <li>2. adopted the Risk Management Recommendations (RMRs) for chloramphenicol, malachite green, carbadox, furazolidone, nitrofurazone, chlorpromazine, stilbenes and olaquinox at step 8;</li> <li>3. adopted Performance Characteristics for Multi-Residues Methods (MRMs) for Veterinary Drugs (Appendix C of the <i>Guidelines for the Design and Implementation of National Regulatory Food Safety Assurance Programme Associated with the Use of Veterinary Drugs in Food Producing Animals</i> (CAC/GL 71-2009)), as recommended by CCRVDF21 at step 5/8;</li> <li>4. approved the Priority List of Veterinary Drugs for Evaluation or Re-evaluation by JECFA as proposed by CCRVDF21;</li> <li>5. approved discontinuation of work on Proposed Draft Maximum Residue Limits for Apramycin (cattle and chicken kidney) as proposed by CCRVDF21.</li> </ol>	<p>AU recommends that member states and observers take note of the matters adopted and implement where applicable.</p>
<p><b>Codex strategic plan 2014-2019</b></p> <p>AU took note of the four strategic goals and the objectives, activities, expected outcomes and the measurable indicators/outputs as outline in the plan.</p> <p>All activities were found to be relevant to the work of the committee</p>	<p><b>AU</b> recommends that:</p> <p><b>There</b> is need for Africa member states to involve relevant scientific experts when developing country positions;</p> <p><b>Guidance</b> from Codex committees on communication of Risk Management Decisions should not be misconstrued as dictating or imposing decisions to members;</p> <p><b>The challenges</b> in the use of official languages in working groups can be resolved through having co-chairs from at least three countries ;</p> <p><b>More technical</b> capacity activities should be undertaken on the margins of the committee</p>

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	<p>sessions. Member states are advised to forward topics of interest to the CCRVDF secretariat for consideration;</p> <p><b>Member states</b> participate in physical working groups in conjunction with committee meetings where appropriate</p>

**Agenda Item 4 Matters of Interest arising from FAO/WHO and from the 78th Meeting of the Joint FAO/WHO Expert Committee on Food Additives (JECFA)**

COMMENTS/OBSERVATIONS	RECOMMENDATIONS OF AU
<p><b>Gentian Violet:</b> JECFA 78<sup>th</sup> concluded that it was inappropriate to set an ADI for Gentian Violet because it is genotoxic and carcinogenic. The Committee could not recommend MRLs, as it was not considered appropriate to establish an ADI. JECFA 78<sup>th</sup> also noted that there was limited information on residues. Gentian Violet is structurally related to malachite green. JECFA 78<sup>th</sup> concluded that it should be considered carcinogenic acting by a genotoxic mode of action.</p>	<p><b>AU concurs</b> with JECFA 78<sup>th</sup> recommendations of no ADI and MRLs for Gentian Violet and should be treated the same way as Malachite Green. However, AU recommends further studies to be conducted on residues of Gentian Violet in food.</p>
<p><b>Recombinant bovine somatotropins (rbST)</b></p> <p>Based on a systematic review of the literature published since the last evaluation, JECFA reaffirmed its previous decision on the ADI “not specified” for somagrebove, sometribove, somavubove and somidobove.</p> <p><b>Note:</b> “<i>The Committee at its fortieth meeting established an ADI and MRLs “not specified” for these four rbSTs. The term “not specified” was used because of the lack of bioactivity following oral intake of rbSTs and IGF-I and the low concentrations and non-toxic nature of the residues of these compounds. The ADI and MRLs “not specified” were reaffirmed by the Committee at its fiftieth meeting.</i>”</p> <p><b>Following are questions forwarded by the CCRVDF21 to JECFA on rbST Matters:</b></p> <p><b>(i) Update the toxicological evaluation</b></p> <p>No new toxicological studies were available. Owing to structural differences between bovine and human somatotrophins, species-specific receptor binding of somatotrophins and lack of bio-activity of rbSTs following oral intake, the Committee concluded that if any rbST residues are present in milk or tissues, they would pose a negligible risk to human health.</p> <p><b>(ii) Update the exposure assessment based on any new occurrence data in food</b></p> <p>The Committee concluded that similar concentrations of total bST were present in milk and tissues of rbST-treated and untreated cows.</p> <p><b>(iii) Consider new data and information related to the possibility of increased levels of IGF-I in the milk of cows treated with rbSTs</b></p> <p>There is a transient increase in IGF-I concentrations in milk of rbST-treated cows, which fall within the normal physiological range. IGF-I is substantially, if not completely, degraded in the gut and is unlikely to be absorbed from the gut and be bio-available at biologically relevant exposures. Therefore, the contribution of exogenous IGF-I resulting from the ingestion of milk from rbST-treated cows is extremely low in comparison with endogenous production.</p> <p><b>(iv) Evaluate potential adverse health effects, including the possibility that exposure of human neonates and young children to milk from rbST-treated cows increases health risks (e.g. the development of insulin-dependent diabetes mellitus)</b></p> <p>Exogenous IGF-I from milk makes no significant contribution to circulating levels of IGF-I in humans, and there are no significant differences in the composition of milk from rbST treated cows when compared with the milk</p>	<p><b>AU</b> having reviewed the report based on the questions forwarded to JECFA 78<sup>th</sup> by CCRVDF 21, recommends the adoption of rbST at step 8.</p>

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<p>from untreated cows. The Committee concluded that there was no additional risk for the development of type 1 diabetes due to the consumption of milk from rbST-treated cows.</p> <p>The Committee also concluded that the literature did not support a link between exposure to IGF-I in milk from rbST-treated cows and an increased risk of cancer.</p> <p><b>(v) Consider new data and information related to the potential effects of rbSTs on the expression of certain viruses in cattle</b></p> <p>There was no new information on the link between rbST use and either potential stimulation of retrovirus expression or prion protein expression in cattle. The Committee considers that the position expressed by the previous Committee remains valid.</p> <p><b>(vi) Consider new data and information related to the possible increased use of antimicrobials to treat mastitis in cows and aspects of antimicrobial resistance associated with the use of rbSTs in relation to human health</b></p> <p>The Committee concluded that there was no evidence to suggest that the use of rbSTs would result in a higher risk to human health due to the possible increased use of antimicrobial agents to treat mastitis or the increased potential for non-compliant antimicrobial residues in milk. The Committee found no specific studies linking the use of rbSTs with the development of antimicrobial resistance. The Committee considers that the previous position remains valid</p>	
<p><b>Zilpaterol hydrochloride</b></p> <p>ADI of 0–0.04 µg/kg body weight on the basis of a LOAEL of 0.76 µg/kg body weight for tremor in humans was established. AU took note that the Committee was not able to recommend MRLs for zilpaterol due to insufficient data.</p> <p>The following data are needed to establish MRLs: (i) results from studies investigating marker residue in liver and kidney (ii) results from studies determining marker residue to total residue ratio in liver and kidney; (iii) results from depletion studies to enable the derivation of MRLs compatible with the ADI.</p> <p>All such studies should use sufficiently sensitive validated analytical methods capable of measuring zilpaterol and its major metabolites in edible tissues of cattle.</p>	<p>AU notes that there is need for more data in order to determine the MRL for zilpaterol hydrochloride. AU recommends waiting for JECFA evaluation based on availability of data required.</p>
<p><b>Dietary exposure to veterinary drug residues</b></p> <p>AU notes that JECFA has adopted a new methodology on the assessment of exposure to veterinary drugs residues. The two new methods for estimating dietary exposure are the global estimate of acute dietary exposure (GEADE) and the global estimate of chronic dietary exposure (GECDE). Both methods differ from the EDI by having the capacity to estimate specific dietary exposure for additional population groups (children aged 12 months and older and infants younger than 12 months) and by using more realistic global consumption amounts as inputs into the calculations.</p>	<p><b>AU</b> recommends and agrees with JECFA that the new approach should continue to be used in parallel with the model diet approach until more experience has been obtained in the interpretation of the results with the new approach.</p>
<p><b>Extrapolation of MRLs to minor species</b></p> <p>Guidance was prepared on the criteria/assumptions used by JECFA for interspecies extrapolations, including minimum data required to support such extrapolations among physiologically related species and extrapolation to additional minor species.</p> <p>Terms to be used:</p> <p><b>extension</b> will be used when sufficient depletion data are available for the minor species to permit the derivation of MRLs for tissues of that species from the depletion curves.</p> <p><b>extrapolation</b> will be used when insufficient depletion data are available in that species to derive MRLs for tissues from that species.</p>	<p><b>AU</b> recommend that JECFA continues to undertake studies in minor species {<i>Codex definition of minor species: minor animal species can be defined as those which are not included in the following list of major animal species: - cattle and sheep(meat), :-Cattle (milk), :-pigs, :-Chicken(including eggs)</i>}</p>

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<p><b>MRLs for veterinary drug residues in honey.</b></p> <p>AU noted that a decision-tree for the establishment of MRLs for veterinary drug residues in honey was established for future use. This was based on consideration of three potential situations envisaged and discussed by JECFA: (i) the establishment of an MRL for honey for substances with an ADI, typically established by JECFA or JMPR, and/or a Codex MRL in a food-producing animals or food commodity; (ii) the establishment of an MRL for honey for substances for which an ADI has not previously been established by JECFA or JMPR; and (iii) the establishment of an MRL for honey for substances that are not approved for use in food animals.</p>	<p><b>AU</b> recommend that member states continue to provide national monitoring data on contaminants and residues of veterinary drugs in honey production.</p>
<p><b>Scope of MRLs established by JECFA relating to fish and fish species.</b></p> <p>AU appreciates the clarification made on the definition of fish and fish species; JECFA defined fish species as:</p> <p>“<b>fish</b>” will be used when an MRL recommendation applies to multiple species of finfish.</p> <p>“<b>seafood</b>”, “<i>mollusc</i>” will be used for species such as clams, oysters and scallops; and</p> <p>“<b>crustacean</b>” will be used when MRLs are recommended for species such as shrimp, prawn and crayfish.</p>	<p><b>AU</b> takes note of the definitions by JECFA.</p>
<p><b>FAO/WHO Global Individual Food consumption data Tool (FAO/WHO GIFT)</b></p> <p>AU appreciates the initiative by FAO and WHO having put together an interdisciplinary team to build a pilot Global Individual Food consumption data Tool (FAO/WHO GIFT). The objective is to collect, harmonize and disseminate – through a FAO hosted web-platform – individual food consumption data available all over the world at national and sub national level. From the food safety perspective, these data will be used in risk assessments by supporting more accurate and refined dietary intake estimates of foods safety hazards.</p>	<p><b>AU</b> appreciates the initiative and encourages member states to support this initiative by providing food consumption data from their respective countries.</p>
<p><b>FAO/WHO activities on antimicrobial resistance (AMR)</b></p> <p>AU has taken note of the activities of FAO/WHO on AMR.</p>	<p><b>AU</b> recommends development of strategies to contain AMR in line with CODEX and OIE guidelines.</p>
<p><b>Handbook on Risk Communication in food safety</b></p> <p>AU appreciates the Handbook on Risk Communication in food safety developed by FAO/WHO. It provides guidance on the good risk communication principles and practices including hands-on training materials for developing effective risk communication capacity across national agencies sharing responsibility in food safety.</p>	<p><b>AU</b> recommends the use of the handbook in developing risk communication strategies in food safety.</p>
<p><b>Response to specific requests from the 21<sup>st</sup> Session of CCRVDF on chlorpromazine, dimetridazole, ipronidazole, metronidazole and ronidazole</b></p> <p><b>chlorpromazine:</b> AU has taken note of JECFA review of Chlorpromazine.</p> <ul style="list-style-type: none"> <li>- The genotoxic profile of chlorpromazine is better characterized showing that it is a photomutagenic substance.</li> <li>- no additional metabolism and residue data have been identified,</li> <li>- data on the fate and possible persistence (accumulation) of chlorpromazine residues in animal products remain insufficient and would not allow establishing maximum residue levels.</li> </ul> <p><b>Nitroimidazoles:(dimetridazole, ipronidazole, metronidazole and ronidazole)</b></p> <p>AU noted JECFA review and took note that although many publications have been identified, some of them are quite old and often contain limited information that also limits their usefulness in risk assessment. Metronidazole is carcinogenic in rodents via a genotoxic mechanism and</p>	<p><b>AU</b> is in agreement with JECFA recommendation that chlorpromazine should not be used in food producing animals.</p> <p><b>AU</b> is in agreement with JECFA review and recommends that Nitroimidazoles should not be used in food producing animals until sufficient scientific information is available to</p>

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has been classified as possibly carcinogenic to human. That there are great similarities of the group of 5-nitroimidazoles with regard to structure-related toxicological properties. It is worth noting that Nitroimidazoles (major examples: metronidazole, tinidazole, ornidazole) are considered by WHO as important antimicrobials in human medicine.	establish an ADI and MRLs.

#### **Agenda Item 6(a) Draft MRLs for Monepantel, at Step 7**

COMMENTS/OBSERVATIONS	RECOMMENDATIONS OF AU
<p>AU appreciates the re-evaluation of Monepantel and note that the MRLs were calculated on the basis of the upper limit of the one-sided 95% confidence interval over the 95th percentile of residue concentrations (UTL 95/95).</p> <p>Consistent with the shortest withdrawal time assigned in Member States with an approved use, JECFA recommended the following MRLs in sheep tissue (monepantel sulfone, expressed as monepantel),</p> <p>New and higher MRL therefore shift back to step 3</p> <ul style="list-style-type: none"> <li>- 500 µg/kg in muscle,</li> <li>- 1700 µg/kg in kidney,</li> <li>- 7000 µg/kg in liver and</li> <li>- 13 000 µg/kg in fat.</li> </ul>	<b>AU</b> recommends acceptance of the proposed higher MRL and acceleration to step 5/8

#### **Agenda Item 6(b) Proposed draft MRLs for Derquantel, at Step 4**

COMMENTS/OBSERVATIONS	RECOMMENDATIONS OF AU
<p>AU appreciates the re-evaluation of Derquantel by JECFA based on the new assessments and also notes that the TMDI approach used as there was insufficient data to calculate an EDI. The <i>revised MRLs</i> in sheep tissues are: 0.3 µg/kg in muscle; 0.4 µg/kg in kidney; 0.8 µg/kg in liver and 7.0 µg/kg in fat.</p>	<b>AU</b> recommends acceptance of the revised MRL and recommends its adoption at step 5/8.

#### **Agenda Item 6(d) Proposed draft RMRs for dimetridazole, ipronidazole, metronidazole and ronidazole, at Step 4**

COMMENTS/OBSERVATIONS	RECOMMENDATIONS OF AU
<p><b>Dimetridazole</b> (antiprotozoal agent and antibacterial agent) JECFA evaluation: 34<sup>th</sup> (1989) JECFA Recommended risk management measures.</p> <p><i>In view of the JECFA conclusions, although insufficient data were available or there was a lack of data to establish a safe level of residues of dimetridazole or its metabolites in food representing an acceptable risk to consumers, significant health concerns were identified. For this reason, competent authorities should prevent residues of dimetridazole in food. This can be accomplished by not using dimetridazole in food producing animals.</i></p> <p><b>Ipronidazole</b> (antiprotozoal agent and antibacterial agent) JECFA evaluation: 34<sup>th</sup> (1989) JECFA Recommended risk management measures</p> <p><i>In view of the JECFA conclusions, although insufficient data were available or there was a lack of data to establish a safe level of residues of ipronidazole or its metabolites in food representing an acceptable risk to consumers, significant health concerns were identified. For this reason, competent authorities should prevent residues of ipronidazole in food. This can be accomplished by not using ipronidazole in food producing animals.</i></p> <p><b>Metronidazole</b> (antiprotozoal agent and antibacterial agent) JECFA evaluation: 34<sup>th</sup> (1989) JECFA Recommended risk management measures</p>	<p><b>AU</b> concurs with JECFA evaluation of Nitroimidazoles (dimitridazole, ipronidazole, metronidazole and ronidazole) and is in agreement with the Risk Management Recommendations for the Nitroimidazoles.</p> <p><i>That is in view of the JECFA conclusions, although insufficient data were available or there was a lack of data to establish a safe level of residues of <b>Nitroimidazoles</b> or their metabolites in food representing an acceptable risk to consumers, significant health concerns were identified. For this reason, competent authorities should prevent residues of <b>Nitroimidazoles</b> in food. This can be accomplished by not using <b>Nitroimidazoles</b> in</i></p>

COMMENTS/OBSERVATIONS	RECOMMENDATIONS OF AU
<p><i>In view of the JECFA conclusions, although insufficient data were available or there was a lack of data to establish a safe level of residues of metronidazole or its metabolites in food representing an acceptable risk to consumers, significant health concerns were identified. For this reason, competent authorities should prevent residues of metronidazole in food. This can be accomplished by not using metronidazole in food producing animals.</i></p> <p><b>Ronidazole</b> (antiprotozoal agent and antibacterial agent) JECFA evaluation: 34<sup>th</sup> (1989) and 42<sup>nd</sup> (1994) JECFA Recommended risk management measures</p> <p><i>In view of the JECFA conclusions, although insufficient data were available or there was a lack of data to establish a safe level of residues of ronidazole or its metabolites in food representing an acceptable risk to consumers, significant health concerns were identified. For this reason, competent authorities should prevent residues of ronidazole in food. This can be accomplished by not using ronidazole in food producing animals.</i></p>	<p><i>food producing animals.</i></p> <p>AU recommends considering the RMRs for Nitroimidazoles proposed by JECFA.</p>

**Agenda Item 8(a) Draft priority list of veterinary drugs requiring evaluation or re- evaluation by JECFA (Report of the EWG on Priority)**

COMMENTS/OBSERVATIONS	RECOMMENDATIONS OF AU
<p>AU appreciates and takes note of the work done by the electronic working group on draft priority list of veterinary drugs requiring evaluation or re-evaluation by JECFA.</p>	<p><b>AU</b> agrees with the recommendation of the EWG that CCRVDF forward the Priority List (Annex 1) to the 38<sup>th</sup> session of the Codex Alimentarius Commission for approval.</p> <p><b>AU</b> further commends Algeria for their participation in the EWG and for their submissions.</p> <p><b>AU</b> recommends to member states to be more proactive and submit veterinary drugs of interest used in their respective countries for evaluation or re-evaluation by JECFA. When undertaking submissions, member states are advised to follow the recommended criteria indicated here below:</p> <p>A Member has proposed the compound for evaluation (a template for information recommended for consideration in the priority list by Codex Committee on Residues of Veterinary Drugs in Foods has been completed and be available to the Committee);</p> <p>-A Member has established good veterinary practices with regard to the compound;</p> <p>-The compound has the potential to cause public health and/or international trade problems;</p> <p>-The compound is available as a commercial product; and</p> <p>-There is a commitment that a dossier will be made available.</p>

**Agenda Item 8(b) Alternative approach to move compounds from the database on countries' need for MRLs to the JECFA Priority List (Report of the EWG on countries' needs for MRLs)**

COMMENTS/OBSERVATIONS	RECOMMENDATIONS OF AU
<p>AU appreciates and takes note of the work done by the electronic working group on alternative approach to move compounds from the database on countries' need for MRLs to the JECFA Priority List.</p> <p>AU commends the EWG for a job well done in achieving to a large extent the task based on the TOR's which were:</p> <p><i>-Identify data availability and gaps for the veterinary drugs identified, taking the information in the database into account; and</i></p> <p><i>- Explore alternative ways to fill data gaps, and prioritize veterinary drugs for evaluation by JECFA.</i></p>	<p><b>AU</b> recommends that member states take an active role in the EWG and submit information on veterinary drugs of interest to their respective countries.</p> <p><b>AU</b> further agrees with the recommendations of the EWG and also support the implementation of the full global survey. AU proposes that the committee works closely with OIE secretariat as they undertake the survey.</p> <p><b>AU</b> proposes that member states support the recommendations of the EWG.</p>

**Agenda Item 8(c) Database on countries' needs for MRLs**

COMMENTS/OBSERVATIONS	RECOMMENDATIONS OF AU
AU took note of the database and observed that only four African countries submitted their needs for MRLs to the database compared to the previous list, which had three.	<b>AU</b> encourages member states to be more proactive and submit their needs for MRLs to the database.